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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE


Applicant:	Alvin Algee	Examiner:	Dana D. Greene
Serial No.:	10/676,316	Art Unit:	3762
Filed:	09/30/2003		
Docket No.:	A03P1065		
For:	ABRASION-RESISTANT IMPLANTABLE MEDICAL LEAD AND A METHOD OF FABRICATING SUCH A LEAD		

AMENDMENT AND REQUEST FOR RECONSIDERATION

Mail Stop Amendments
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being facsimile
transmitted to the United States Patent and Trademark Office
on:

March 18, 2005


Estella Pineiro Date 3/18/05

Dear Sir:

In response to the Office Action dated February 25, 2005, please amend the
above-identified patent application as follows:

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TELECOPIER COVER SHEET**RECEIVED**
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March 18, 2005

To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818/493-2251
Attention: Examiner: Dana Greene Art Unit: 3762	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 703/872-9306	Telecopier: 818/362-4795
RE: AMENDMENT AND REQUEST FOR RECONSIDERATION Applic. No. 10/676,316 Filed: 09/30/2003 Docket No. A03P1065	Number of pages being sent: <u>13</u> (including cover page)

PLEASE DELIVER TO EXAMINER DANA GREENE UPON RECEIPT.

THANK YOU.

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TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendments
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- ☒ Amendment and Request for Reconsideration
☒ Transmittal Letter, Fee and Cert. of Mailing

CALCULATION OF FEES					
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE
A	TOTAL CLAIMS FEE	19	20	0	X \$ 50
B	INDEPENDENT CLAIMS FEE**	1	4	0	X \$200
C	MULTIPLE- DEPENDENT				X \$ 360
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160				0
E	ADDITIONAL FEES (i.e., Surcharge -- Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:				0
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)				\$0**

☒

Charge Deposit Account No. 16-0068
the amount of

\$0**

A copy of this letter is
enclosed.

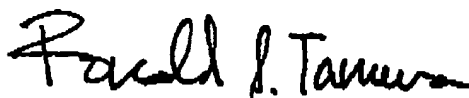
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PATENT

- X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068
- X Any additional filing fees required under 37 CFR 1.16.
- X Any patent application processing fees under 37 CFR 1.17.
- X The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
- X Any patent application processing fees under 37 CFR 1.17.
- X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date:

3/18/05

Ronald S. Tamura
Reg. No. 43,179
Attorney for Applicants
818-493-3157

CUSTOMER NUMBER: 36802

I hereby certify that this correspondence is being facsimile transmitted to
the United States Patent and Trademark Office on:

March 18, 2005



Estella Pineiro

Date

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